

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000260470

**Entity Name:** ADORN, LLC

**Current Principal Place of Business:**

3030 NORTH ROCKY POINT DRIVE WEST  
TAMPA, FL 33607

**Current Mailing Address:**

3030 N. ROCKY POINT DRIVE  
SUITE 150  
TAMPA, FL 33607 US

**FEI Number:** 85-1338700

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVENPORT, KEYSHA J  
3030 N. ROCKY POINT DRIVE, SUITE 150, TAMPA, FL33607  
TAMPA, FL 33607 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** KEYSHA JILLIAN DAVENPORT

05/01/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            DAVENPORT, KEYSHA JILLIAN  
Address        3030 N. ROCKY POINT DRIVE SUITE  
                  150  
City-State-Zip: TAMPA FL 33607

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEYSHA JILLIAN DAVENPORT

OWNER

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date